| JUDICIAL DISTRICT, STATE OF IDAH       |  |
|--|--|
| COUNTY                                 | CLERK OF THE DISTRICT COURT                        |
| SMALL CLAIMS DEPARTMENT                | BY, Deputy   |
|  |  |
|  | , ) CASE NO  |
|  | . ) AFFIDAVIT OF SERVICE OF:                       |
| PLAINTIFF(S),                          |  |
| vs.                                    | ) SUMMONS  |
|  | ANSWER FORM  |
|  | , ) INFORMATION FOR DEFENDANTS<br>OTHER:           |
|  | , <u> </u>   |
| DEFENDANT(S                            | ). )   |
| STATE OF IDAHO )                       |  |
| ) ss:                                  |  |
| County of)                             |  |
|  | ach defendant served, or include information       |
| on this form as to how each defendan   |  |
|  | being first duly sworn, depose and state:          |
|  | d I am not a party to this case nor an employee of |
| a party to this case.                  |  |
| On (date                               | e), I served true and correct copies of the        |
| documents indicated above on           | (name of defendant) by:                            |
|  | (name of defendant)                                |
|  | (location where                                    |
| process served).                       |  |
|  | , a person over the                                |
| age of 18 years, at                    | , the  |
| usual place of residence of            | (name of defendant).                               |
| Personal delivery to                   | , the defendant's                                  |
| authorized agent for service of pro    | ocess, at  |
| (location                              | on where process served).                          |
|  | intiff(s) \$ for this service.                     |
|  |  |
|  | Cianatura of Brassas Carrer                        |
|  | Signature of Process Server                        |
| Subscribed and sworn to before me this | date:  |
|  |  |
|  | Deputy Court Clerk or Notary Public for Idaho      |
|  | If Notary, my commission expires:                  |

Affidavit of Service Small Claim Form SC2-1 Effective 4/2001 Amended 12/2002